FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| wasnington, D.C. 20549 | |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | 01.5 | ection | 30(11) 0 | n trie | invesin | nent C | ompany Act o | 1940 | | | | | | | |
|---|---|--|--|------------|--|-----------------------------|----------|---|------------------|--|--|--|---|--|--------------------------|---|--|---|---|
| 1. Name and Address of Reporting Person* <u>Torgerson Lance</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Civeo Corp [CVEO] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner | | | | | | |
| (Last) (First) (Middle) 9645 45 AVENUE NW | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/27/2021 | | | | | | | | Officer (give title Other (specify below) below) | | | | | | |
| (Street) EDMONTON A0 T6E 5Z8 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Appli Line) Form filed by One Reporting Person X Form filed by More than One Reportir | | | | | | | | | | rson | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | Perso | on | | | |
| | | Table | I - No | on-Deriva | ative | Secu | ırities | Ac | quire | d, Di | sposed o | f, or E | Benefi | ciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Translate | | | 2. Transaction Date (Month/Day/ | | zA. Deemed Execution Date, if any (Month/Day/Year) | | te, | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | 5. Amount Securities Beneficially Owned Foll Reported | | es ially Following | Form: y (D) or | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transac (Instr. 3 | ction(s) | | | (111511. 4) |
| Common | Stock | | | 10/27/20 | 21 | | | | S ⁽¹⁾ | | 5,018 | D | \$22.5 | 51 ⁽¹⁾ | 1,51 | 9,225 | | I | Torgerson Family Trust ⁽²⁾ |
| Common Stock | | | | 10/27/2021 | | L | | | S ⁽¹⁾ | | 743 | D | \$22.5 | 51 ⁽¹⁾ | 460,368 | | I | | 989677 Alberta Ltd |
| Common Stock | | | 10/28/20 | 10/28/2021 | | | | S ⁽³⁾ | | 5,140 | D | \$22.5 | 56 ⁽³⁾ | 1,514,085 | | I | | Torgerson Family Trust ⁽²⁾ | |
| Common Stock | | | | 10/28/2021 | | | | | S ⁽³⁾ | | 762 | D | \$22.5 | 56 ⁽³⁾ | 459,606 | | I | | 989677 Alberta Ltd |
| Common Stock | | | | 10/29/2021 | | | | | S ⁽⁴⁾ | | 5,534 | D | \$22.5 | 56 ⁽⁴⁾ | 1,508,551 | | I | | Torgerson Family Trust ⁽²⁾ |
| Common Stock | | | 10/29/20 | 21 | | | | S ⁽⁴⁾ | | 820 | D | \$22.5 | 56 ⁽⁴⁾ | 458,786 | | I | | 989677 Alberta Ltd | |
| | | Tal | ble II | | | | | | | | posed of, convertib | | | | Owne | d | | , | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | ion Execution Date, if any (Month/Day/Year) A. Deemed Execution Date, if any (Month/Day/Year) A. Transaction Code (Instr. 8) Sc. A. (A. Di. of (Ir | | 5. Nu of Deriv Secu Acqu (A) o Disport of (D | 5. Number 6. Date Exercis | | | ate Amount of | | e and int of rities rlying ative rity (Inst | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownershi t (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | Amour or Number of Shares | er | | | | | |
| | od Address of | Reporting Person* | | | | | | | | | | | | | | | | | |
| (Last) 9645 45 | AVENUE 1 | (First) | (N | fiddle) | | | | | | | | | | | | | | | |

(Last) (First) (Middle)
9645 45 AVENUE NW

(Street)
EDMONTON A0 T6E 5Z8

(City) (State) (Zip)

1. Name and Address of Reporting Person*
Torgerson Tammy.

| (Last) 9645 45 AVENU | (First) | (Middle) |
|-------------------------|---------|----------|
| (Street) EDMONTON | A0 | T6E 5Z8 |
| (City) | (State) | (Zip) |

Explanation of Responses:

- 1. The shares were sold in multiple trades pursuant to a 10b5-1 plan at prices ranging from \$22.10 to \$22.815. The price reported above reflects the weighted average sales price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 2. Each of the reporting persons serves as a co-trustee of the trust and is a current or future beneficiary thereof.
- 3. The shares were sold in multiple trades pursuant to a 10b5-1 plan at prices ranging from \$22.00 to \$22.85. The price reported above reflects the weighted average sales price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 4. The shares were sold in multiple trades pursuant to a 10b5-1 plan at prices ranging from \$22.44 to \$22.80. The price reported above reflects the weighted average sales price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Remarks

 /s/ Lance Torgerson
 10/29/2021

 /s/ Tammy Torgerson
 10/29/2021

 ** Signature of Reporting Person
 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.